

Minor Business License Application 3-Year

Providing false information on this application may result
 in denial, revocation, or other disciplinary action.
 Some license types may require interviewing or testing.

Please Check: Horse OTB Location Minor

For Office Use Only

New	Renewal	Fingerprint card(s) received:		Yes	No
Date Received		Mail	CRC Representative		
Location		Walk-in	License/Badge Number		
Check or Money Order Number	Amount		PSR Number		

Application Fees — Minor Business Application Fee: \$90.50
 Fingerprint Fee (if applicable): \$39.50

Please make checks payable to the Division of Racing Events. By law, all insufficient fund (NSF) checks returned to the Division will be assessed an NSF Fee of \$41.00 in addition to any other penalty that may be assessed by the Commission or Division. **License application fees are nonrefundable.** All business licenses are conditioned upon satisfactory background investigation.

Other Licenses Required — Any personnel involved in racing operations and has access to restricted areas is required to obtain an occupational license. Please consult a Racing Division Official if you have questions regarding who should be licensed.

*** Pursuant to Commission rules:** All licensees or applicants for licensure shall notify the Division promptly of any change of address.

Business Support Category:

Please mark appropriate category for Type of Business Support License.

Concession Operator	Feed Supplier	OTB Facility	Video Operator
Photo Finish Business	Tack Shop	Satellite Corporation	Tip Sheet Operator (independent)
Training Track	Other Support Services	Racing Club	

Must include a Partnership/Corporation/Stable Name form (DR 9066).

Please print in ink or type. Answer all questions, if not applicable, write N/A.

Type of Business Support License

Email Address

Name of Business Owner Requesting Badge

Social Security Number (SSN) of Business Owner Requesting Badge

Full Legal Business Name

Trade Name(s) (If applicable)

Mailing address for service of all papers and notices *

Suite Number

City

State ZIP Code

Business Phone Number

Cell Phone Number

FEIN Number

Colorado Sales Tax License Number

State of Incorporation/Registration

Date of Incorporation/Registration

If a Corporation, in what states is it authorized to do business

For Office Use Only

License Number

Name of Principal Officers, Directors, Owners, General Partners and Managers

Name

Position

SSN

Date of Birth

Street Address

City

State ZIP Code

Name

Position

SSN

Date of Birth

Street Address

City

State ZIP Code

Name

Position

SSN

Date of Birth

Street Address

City

State ZIP Code

Name

Position

SSN

Date of Birth

Street Address

City

State ZIP Code

For Office Use Only

License Number

Business Officers, Directors, Owners, Partner Or Manager's Relations

Do any of the Business' officers, directors, owners, partners, or managers have any relatives who are members of the Colorado Racing Commission or employees of the Division of Racing?..... Yes No

If so, please list names.

Name Relationship

Name Relationship

License History

Are you presently licensed, or have you been licensed within the last five (5) years by any racing or gaming jurisdiction, including Colorado?..... Yes No

If you answered "Yes" to this question, provide the following information. Use additional paper if necessary.

State Year Issued License Occupation

State Year Issued License Occupation

State Year Issued License Occupation

State Year Issued License Occupation

Attachments

- A. Attach copies of the lease agreement or contract which this business has with the Racing Association, if applicable.
- B. All Corporations/LLCs must appoint an Authorized Agent to act on their behalf. Such Agent must be licensed (Form DR 9053) and be accessible to the Colorado Racing Commission and Division. An Appointment of Authorized Agent form (DR 9022) must be submitted by Corporations/LLCs with this application.
- C. All Corporations/LLCs must attach a Certificate of Good Standing for the Corporation from the Secretary of State's office.

For Office Use Only

License Number

Background Information - Be Specific. Omission could effect license)

- A.** Within the last **ten** years, has this business or its officers, directors, owners, partners, or managers had contact with law enforcement (been arrested, cited, charged with a crime)..... Yes No

- B.** Within the last **ten** years, has the business or its officers, directors, owners, partners, or managers been convicted, entered a plea of guilty or no contest, or been fined for any criminal offense, either felony, misdemeanor, petty offense, or local ordinance?..... Yes No

- C.** Within the last **ten** years, has the business or its officers, directors, owners, partners, or managers had any other Colorado licenses denied, revoked or suspended?..... Yes No

- D.** Is the business or its officers, directors, owners, partners, or managers delinquent in the payment of any taxes, interest, penalties or judgments owed to the State of Colorado? If yes, please provide explanation..... Yes No

- E.** Within the last **ten** years, have any of the business' officers, directors, owners, partners, or managers ever been placed under or on court supervision, probation or parole?..... Yes No

- F.** Are any officers, directors, owners, partners, or managers delinquent in payments for child support? If yes, please provide explanation..... Yes No

If "Yes" to any of the above questions, provide the following information. Use additional paper if necessary.

Name(s) of Business' Officers, Directors, Owners, Partners or Managers

Date of Charge/Crime/Offense State County

Nature of Charge/Crime/Offense Final Result

Name(s) of Business' Officers, Directors, Owners, Partners or Managers

Date of Charge/Crime/Offense State County

Nature of Charge/Crime/Offense Final Result

Name(s) of Business' Officers, Directors, Owners, Partners or Managers

Date of Charge/Crime/Offense State County

Nature of Charge/Crime/Offense Final Result

For Office Use Only

License Number

Racing/Gaming History/Infractions

- A. Has the business or its officers, directors, owners, partners, or managers had a conviction for any gambling related offense?..... Yes No
- B. Has the business or its officers, directors, owners, partners, or managers racing or gaming license ever been denied or revoked?..... Yes No
- C. Have any of the business’ officers, directors, owners, partners, or managers been placed under suspension for more than 7 days or been the subject of any alleged rule violation in this or any other racing or gaming jurisdiction?..... Yes No
- D. Has the business or its officers, directors, owners, partners, or managers ever been ruled off, suspended, or discharged for cause, or denied the privileges of a racetrack or gaming facility, by any commission or board?..... Yes No
- E. Has the business or its officers, directors, owners, partners, or managers ever had any other license regulated by a government agency suspended, revoked, denied or issued conditionally?..... Yes No

If you answered “Yes” to any of these questions, provide the following information. Use additional paper if necessary.

Date (MM/DD/YY) State Suspension, Denial, Revocation, Etc.

Restored: Yes No

Date (MM/DD/YY) State Suspension, Denial, Revocation, Etc.

Restored: Yes No

Date (MM/DD/YY) State Suspension, Denial, Revocation, Etc.

Restored: Yes No

Date (MM/DD/YY) State Suspension, Denial, Revocation, Etc.

Restored: Yes No

For Office Use Only

License Number

Certification

By accepting any license issued pursuant to this application, I agree to be familiar with and comply with the provisions of the Colorado Racing Commission's regulations pertaining to racing (**which may include "for cause" or random drug and alcohol testing**), and laws of the United States and the State of Colorado, and the subdivisions thereof. I consent to allow personnel of the Division of Racing Events or authorized law enforcement agents to search, without warrant, my person, personal property, vehicle(s), and other work premises while within the racetrack, simulcast facility, other licensed premises, or any adjacent related facilities and premises thereto, pursuant to Commission rules. I understand that any investigation and any information submitted regarding this application are subject to the Open Records Act of Colorado, and I hereby waive any right of confidentiality. I authorize all reporting agencies and other law enforcement agencies to release to the Commission, the Division, or its agents, any information requested by them for completion of the background investigation and processing of this application. I consent to the release of the information contained in my application to law enforcement agents of this or any other state, or the U.S. government; and I understand that providing false information or failing to provide complete information on this application will justify either the Commission or the Division to assess a fine, refuse to issue, deny, suspend, revoke my license, or institute other disciplinary action. I understand that my fingerprints will be used to check the criminal history records of the Colorado Bureau of Investigation (CBI) and the Federal Bureau of Investigation (FBI).

In consideration for any of the investigatory agencies releasing any information concerning me contained within criminal history record files to either the Commission or the Division, or to each other, I, on behalf of myself, my spouse, legal representatives, heirs, and assigns, hereby release, waive, discharge and agree to hold harmless the Commission, the Division, investigating agencies, their officers and employees, from all liability for any claim of damage resulting from this information.

I understand and agree that any license I receive from the Division, issued pursuant to this application, shall be temporary and conditioned upon the Division rendering a final determination on my suitability to receive permanent licensure. Any limitation or condition upon my temporary licensure does not constitute a final determination, and is not appealable until I receive such a final determination from the Division. Until I receive such a final determination from the Division, I agree and consent to the license being summarily denied upon demand and notice provided to my address noted herein, subject only to my right to appeal such action to the Commission. All license badges remain the property of the Division, and shall be returned upon demand therefore by either the Commission or the Division. I understand that all license and application fees are nonreturnable whether or not I am approved for licensure.

I certify under penalty of perjury that the statements and answers I have provided in this application are complete and true and that no material facts or information relevant to qualification have been omitted.

Signature of Applicant/Authorized Agent

Date (MM/DD/YY)

Title

For Office Use Only

License Number